



REQUEST FOR CHANGE IN MINE LICENSE APPLICATION INFORMATION

Submit for "changes only" in your license application

Please fill out all information in this section.

COMPANY NAME: _____ MINE NAME: _____

M.I.# _____ REQUESTED BY: _____ DATE: _____

Signature

Information Change

Please check and fill out only the sections for which you are requesting a change.

☐ Mine Name _____ ☐ MSHA ID # _____ ☐ DMLR # _____

☐ Name and address of person with overall responsibility for operating decisions at the mine

☐ Name and address of agent of the operator with responsibility for business operations of mine

☐ Name(s) and address(es) of the lead person with overall responsibility for health and safety at the mine, and others, as applicable

☐ Name and address of person to be contacted in event of an accident or emergency

Phone: _____

☐ Federal mine I.D. numbers of other mines with 20% or greater ownership interest

☐ Change in company officers and officials (attach additional sheet if necessary)

☐ Official mailing address

